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TRANSPORTER

FACILITY

SPRINGFIELD, ILLINOIS 62794-9276 (217) State Form LPC 62 8/81

IL532-0010

NB4350

FOR SHIPMENT OF HAZARDOUS AND SPECIAL WASTENB6141

EASE TYPE (Form designed for use on a	elite (12-pitch) typewriter.)	EPA FOR	n 8700-22 (Re		Form	Approved. OMB !	10. 2050-0	0039, Expires 9	-30-96		
UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's U		. Docu	anifest Iment No.	2. Page of	required b	y Federal	shaded areas law, but is req	is not uired by		
3. Generator's Name and Mailing Address BTR SEALING SYSTEMS	enerator's Name and Mailing Address Location If Different					A. Illinois Manifest Document Number FEE PAID 7 3 / 1 2 2 3 IF APPLICABLE					
3200 MAIN ST., KEOKUK,	IA 52632				B. Illinoi	s 4 1 2	(4)	IF AFFLIC	ADLE		
4. *24 HOUR EMERGENCY AND SPILL AS	SSISTANCE NUMBER	S*	8006	458265	Gene ID	erator's 1 9	0, 0,	1, 9, 9, 9	, 9,		
5. Transporter 1 Company Name	6.	US EPA	ID Number		C. Illinoi	s Transporter's			78		
Clean Harbors Env. Serv	an Harbors Env. Services Inc. MAD 03-932-2250				D. (617) 849-1800 Transporter's Phone						
7. Transporter 2 Company Name	sporter 2 Company Name 8. US EPA ID Number				E. Illinois Transporter's ID						
						F. () Transporter's F					
9. Designated Facility Name and Site Addre	, INC.	US EPA	A ID Number		G. Illinoi Facili ID	s ty's 0 3 1	6,0	0,0,0,5	1,		
	11800 S. STONY ISLAND AVE.				H. Facility's Phone						
CHICAGO, IL, 60617		ILD	00060847	1.	(773) 646-6202						
11. US DOT Description (Including Proper	IS DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Con			12. Conta	iners	13. Total	14. Unit	l.			
				No.	Туре	Quantity	Wt/Vol	Waste N			
a. WASTE, CORROSIVE LIQUI								EPA HW NO			
8, UN3264, PG II (NIT	RIC ACID, HYI	DROCHLORIC 1	ACID)	0. 0. 1.	D.F 0	i 0 0 0 0 3	G	Authorization	Number		
b. WASTE, CORROSIVE LIQUID	,BASIC,INORGA	NIC, N.O.S.,	ð,					X X D O			
UN3266, PGII (AMMONIUM I	HYDROXIDE, POT	ASSIUM HYDR	OXIDE)				-	Authorization			
				0 0 1	D . F 0	0 0 0 3	G	0 0 0 2			
c. WASTE, ANTIMONY TRICHLO	ORIDE, LIQUID	, 8, UN1733	, PG					X X D O			
II								Authorization	Number		
				0.0.1	D.F O	0 0 0 1	Р	0 0 0 2 EPA HW No			
d. WASTE, CORROSIVE LIQUI	DS, FL <mark>AMMA</mark> BLE	, N.O.S., 8	,					O CIXX			
UN2920, PG II (ACETIC	ANHYDRIDE)			0 0 1	7 5 0	0 0 0 1	,,	Authorization			
L Additional Description for Materials Liste	d Abovo			U U . I		0 0 0 1 1 ling Codes for		0 0 0 2			
J. Additional Description for Materials Lister	u Above				In Ite	m #14	vvastes	Listed Abov	C		
b: LP 1x20 (L.C)											
c: LP lx5 (S.C.R) D003											
d: LP lx5 (L,C,I) D001											
15. Special Handling Instructions and Additional Information TRUCK: 5111 JOB: NB4350/NB51412 LIC: P77712											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.											
be economically practicable and that I have and future threat to human health and the	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										
Printed/Typed Name		Signature				1 1		Date Month Day			
HOUSHANG GOLAFSHAR		Hau	shamo	C_{-}	as the	« ha	(0 5 2 2	9 7		
17. Transporter 1 Acknowledgement of Rec	ceipt of Materials	, , ,	1		- U			Date			
Printed/Typed Name		Signature	- 4	//		/		Month Day	/ Year		
DAVID COCHRAN			and		M			0 5 2 2	9 7		
18. Transporter 2 Acknowledgement of Rec	ceipt of Materials							Date			
Printed/Typed Name		Signature						Month Day	/ Year		
19. Discrepancy Indication Space	-				-			American (1977) Proposition (1974) Proposition (1974)	THE PLANT COURSE OF CONCERNMENTS		
20. Facility Owner or Operator: Certification	n of receipt of hazardou	us materials covered	d by this mani	fest except	as noted	in item 19.		Date			
Printed Typed Name		Signature	14 .					Month Day	/ Year		
KOR SHEAHAN	<u> </u>	- Kol e	Thecha					0521	147		
This Agency is authorized to require, pursuant to Illir this information may result in a civil penalty against per day of violation and imprisonment up to 5 years. This for	the owner or operator no	t to exceed \$25,000 p	er day of violati	21, that this on. Falsification	information on of this	be submitted to information may r	the Agen esult in a	ncy. Failure to a fine up to	provide \$50,000		

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TRANSPORTER

FACILITY

76 SPRINGFIELD, ILLINOIS 62794-9276 (217) 78

IL532-0610

FOR SHIPMENT OF HAZARDOUS AND SPECIAL WASTENB6141

4	<u>3.</u>	P.O. BOX 76 S	PRI
		FASE TYPE	
Ī		EASE TYFE (Form designed for use on elite (12-pitch) typewr	_
		UNIFORM HAZARDOUS 1. General	or's
ı	}	WASTE MANIFEST IADOR)5:
		3. Generator's Name and Mailing Address	Lo
		DTR SEALING SYSTEMS	
	Ш	3200 MAIN ST., KEOKUK, IA, 52632	
		4. *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUM	/IBE
		5. Transporter 1 Company Name	
		Clean Harbors Env. Services Inc.	
		7. Transporter 2 Company Name	
		9. Designated Facility Name and Site Address	1
1		CLEAN HARBORS SERVICES, INC.	
		11800 S. STONY ISLAND AVE.	
		CHICAGO, IL, 60617	
		11. US DOT Description (Including Proper Shipping Name,	laz
	-		
	G	a. WASTE, HYDROGEN SULFIDE, LIQUEF	E
	Е	,	
	N E	NONE, Poisonous by Inhalation,	. ()
	R	b. WASTE, Perchloric acid more than	5

State Form LPC 62 8/81 EPA Form 8700-22 (Rev. 6-89)

NR 43.5 0 Form Approved. OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's U		Docu	anifest iment No.	2. Pa	required b	y Federa	e shaded areas is not al law, but is required by			
	IAD00513		141	004	A. Illinois Manifest Document Number						
TO 41 OOO FEE PAID							FEE PAID				
	DTR SEALING SYSTEMS					IL 7341220 FEE PAID IF APPLICABLE					
	3200 MAIN 3T., KEOKUK, IA, 52632				Generator's						
4. *24 HOUR EMERGENCY AND SPILL ASSIS				458265		B. Illinois Generator's ID 9 1 9 0 0 1 9 9 9 C. Illinois Transporter's ID 1778 D. (617) 849-1800 Transporter's Phone					
5. Transporter 1 Company Name 6. US EPA ID Number C. Illinois Transporter's ID WAD 02-932-2250 D. (512) 949-1996							ansporter's Phone				
7. Transporter 2 Company Name	8.	US EPA ID N				17) 849-18 lois Transporter's		ansporter s Priorie			
7. Hansporter 2 Company Name	ŭ. I	00 21711211	iainibo.		F. () Transporter's Phone						
Designated Facility Name and Site Address	10.	US EPA ID N	lumber		G. Illir	/ nois	- 111	ansporter's Phone			
9. Designated Facility Name and Site Address 10. US EPA ID Number CLEAN HARBORS SERVICES, INC.											
11800 S. STONY ISLAND AVE					ID 0 3 1 6 0 0 0 0 5 1 H. Facility's Phone						
CHICAGO, IL, 60617	· ·	ILD0006	เกลสา	7		'					
11. US DOT Description (Including Proper Shipp	ning Name Hazar			12. Conta	(773) 546-6202 ainers 13. 14.						
The de det decemption (mendang respect orapp	mig ivaine, riazan	a ciaco, and is mainson,		No.	Туре	Total Quantity	Unit Wt/Vol	l. Waste No.			
a. Wagne HVDD/VEN GHIETDE		0.0		140.	1,900	Quartity	VV 0 V 01	Waste No. EPA HW Number X In 1 1 15 15 Authorization Number			
"ADIL, MIDROGLIE SOUL IDL,	-							XXIII la la			
NONE, Poisonous by Inhala	tion, ZONE	В		0.0:1	rs - 121	010101110	p				
b. rars dimes to				0 0 1	IJ F	0 0 0 1 2	1	EPA HW Number XX T 0 0 1 1 1 1 1 1 1 1			
b. WASTE, Perchloric acid mo								XXIDIQIQIT			
more than 72 per cent aci	d, by mass	,a.i,UNIO73,FG	1	n n 1	ਾਜ - ਜਾ	010101013	175	Authorization Number			
C. Very AR CORPOR AND ARCON STORY OF THE PARK OF THE P				0.0.1		010101013	1.7	EPA HW Number			
WASTE, OXIDIZING LIQUID,	N.O.S., 5.	1, UN3139, PG	11					XXIDIOIOII			
(IODINE)				0.0.1	n · F	010101011	-	Authorization Number			
d. va dem varante dominar	W O 0 C	1 INTEGA DO	T T	<u> </u>		ur ur ar ar ar	1	EPA HW Number			
WASTE, BARIUM COMPOUNDS,	N_Q_5_, 8_	I, UNIDOM, PG	1.1					XXIn In In Is Authorization Number			
(BARIUM HYDROXIDE)				n n 1	n·F	ת ומוחומות	p				
J. Additional Description for Materials Listed Abo	ove				K. Hai	ndling Codes for		s Listed Above			
a: LP lx5 (3.T)					l in i	tem #14					
b: LP 1x5 (L.C.I) D002											
c: LP lx5 (L.I)											
d: LP 1x5 (3.E)											
15. Special Handling Instructions and Additional	Information										
TRUCK:5111	JOB	:NB4350/NB6141	.2								
LIC: P77712											
 GENERATOR'S CERTIFICATION: I hereby de- proper shipping name and are classified, packe according to applicable international and nation 	d, marked, and lab	eled, and are in all respect	fully and s in prop	d accurately er condition	describ	ed above by sport by highway					
If I am a large quantity generator, I certify that	I have a program	in place to reduce the volu	me and	toxicity of v	vaste ge	nerated to the de-	gree I h	nave determined to			
be economically practicable and that I have sel and future threat to human health and the envi	ected the practicab	le method of treatment, sto	orage, or	disposal cu	rrently a	available to me wh	iich mir	imizes the present			
select the best waste management method that			.,	90			,	Date			
Printed/Typed Name		Signature		- 1		1		Month Day Year			
HOUSHANG GOLAFSHAR		Hoersha	ma	Col	al	The Ca		052297			
17. Transporter 1 Acknowledgement of Receipt	of Materials		0		C			Month Day Year 0 5 2 2 9 7 Date			
Printed/Typed Name		Signature	1	1	_	/		Month Day Year			
DAVID COTIDAN		- In	ent	(/	or			0 5 2 2 9 7			
18. Transporter 2 Acknowledgement of Receipt	of Materials			-				Date			
Printed/Typed Name		Signature						Month Day Year			
19. Discrepancy Indication Space											
то. Бізогерапсу пішеацогі зрасе											
,											
20. Facility Owner or Operator: Certification of re	eceint of bazardo	is materials covered by the	nis mani	fest excent	as not	ed in item 19		Date			
Printed/Typed Name	Josipi of Hazardot	Signature			. 40 1100	00 111 1011 10.		Month Day Year			
ISOR SHEAHAN		Try Al	make					052397			

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TRANSPORTER

FACILITY

SPRINGFIELD, ILLINOIS 62794-9276 (217)

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FOR SHIPMENT OF HAZARDOUS AND SPECIAL WASTENBE141

	State F	orm LPC 62 8/81	IL532-06.9	NR.	4950	NB6141
ASE TYPE (Form designed for use on elite (12			00-22 (Rev. 6-89)	Form App	roved. OMB No.	2050-0039, Expires 9-30-96
UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EP. TAD00513602		Manifest Document No.	2. Page 1	Information in required by Fi Illinois law.	n the shaded areas is not ederal law, but is required by
3. Generator's Name and Mailing Address	Location If		11.700)	A. Illinois Ma	anifest Docum	ent Number
DTR SEALING SYSTEMS)	н 7	3/1100	1 FEE PAID 1 IF APPLICABLE
3200 MAIN ST., KEOKUK, IA	52522			B. Illinois	341/4	IF AFFLICABLE
			4	Generato		
 *24 HOUR EMERGENCY AND SPILL ASSIST Transporter 1 Company Name 	6.	US EPA ID I	8006458265	1		0 1 9 9 9 9
	1				ansporter's ID	
Clean Harbors Env. Service		MAD 03-9				Transporter's Phone
7. Transporter 2 Company Name	8. 	US EPA ID I	Number	E. Illinois Tra	ansporter's ID	Transporter's Phone
9. Designated Facility Name and Site Address CLEAN HARBORS 3ERVICES, I	10.	US EPA ID I	Number	G. Illinois Facility's ID	0.3.1.6.	0 0 0 0 0 0 5 1 1
11800 S. STONY ISLAND AVE	•			H. Facility's		0 0 0 0 1
CHICAGO, IL, 60617	1	ILDOOO	608471	(,,,,,)		
11. US DOT Description (Including Proper Shipp	ing Name Hazard Clas			ainers	5 46-6202	4
11. 00 bot bescription (moluting r toper shipp	ing Ivaine, Hazard Olas	s, and ib realliber,		1 1	Total U	nit Waste No
			No.	Type Qu	antity Wt	Vol VVaste No.
a. WASTE, PESTICIDES, SOLID, UN2588, PG II (2,4,5-TRIC		., 6.1,				XXF 0 2 7 Authorization Number
			0 0 1	D . F 0 0	0 0 1	P 0 0 0 2 8 4
b. WASTE, MERCURY COMPOUNDS,	SOLID, N.O.S.	., 6.1,				EPA HW Number
UN2025, PG II (MERCURIC P	ACETATE)		0.0.1	D E 0.0	0.0.7	XX D 0 0 9 Authorization Number
c. WASTE, MERCURY, 8, UN2809,	DC TTT		0.0.7	D F 0 0	0 0 1	P 0 0 0 0 2 8 4 EPA HW Number
C. Wilding Financially by Wind body	T As THE SEA SEA SEA					XXIUI11511
						Authorization Number
	**************************************	gn t-gn	0 0 1	D-F 01 01	01011	G 01010121814
d. WASTE, ACETYL CHLORIDE, 3,	, UNITIT, PG.	FT				XXID IO IO II
						Authorization Number
			0 0 1	D F 0 0		G 01010121814
J. Additional Description for Materials Listed Abo	ve		,	K. Handling (In Item #1		stes Listed Above
				I KI KOIII #	•	
b: LP 1x5 (3.E)						
c: LP 1x5 (L.T)						1
d: LP 1x5 (L.C.I.R) D002 D	03					
15. Special Handling Instructions and Additional	Information		***	·		
TRUCK:5111	JOB: NB	4350/NB614:	12			
LIC: P77712						
16. GENERATOR'S CERTIFICATION: I hereby dec	lare that the conte⊓ts of t	this consignment are	e fully and accurately	v described abo	ve by	
proper shipping name and are classified, packed according to applicable international and national	d, marked, and labeled, a al government regulations	and are in all respects.	ts in proper condition	n for transport b	y highway	
If I am a large quantity generator, I certify that be economically practicable and that I have sele	I have a program in place ected the practicable met	e to reduce the volu- hod of treatment, sto	ime and toxicity of vorage, or disposal or	waste generated urrently available	to the degree e to me which	e I have determined to minimizes the present
and future threat to human health and the envir	onment; OR, if I am a sm	nall quantity generat				
select the best waste management method that	is available to me and th	iat i can afford.				Date
Printed/Typed Name		Signature			2	Month Day Year
HOUSHANG GOLAFSHAR		House	any (las	Luce	0 5 2 2 9 7
17. Transporter 1 Acknowledgement of Receipt of	of Materials		0			Date
Printed/Typed Name		Signature	11/1	- 1		Month Day Year
DAVID COCHRAN		- An	if Cla	W-		052297
18. Transporter 2 Acknowledgement of Receipt of	of Materials					Date
Printed/Typed Name		Signature				Month Day Year
19. Discrepancy Indication Space			· · · · · · <u>-</u> · · <u>-</u> · ·			
20. Facility Owner or Operator: Certification of re	ceipt of hazardous mat	erials covered by t	his manifest except	t as noted in it	em 19.	Date
Printed/Typed Name		Signature //	1			Month Day Year